MSHS COVID-19 Personal Protective Equipment (PPE) Practices

Updated: September 6, 2023

This policy is subject to change based upon updated information from the CDC, NYS Department of Health, and other sources.

Mount Sinai

PUI and COVID-19 Positive Definitions

PUI = Person/Patient under investigation	COVID-19 Positive
• Test pending for COVID-19 • Isolation Room Type = Single Room* • Isolation Designation: Special Droplet + Contact Precautions	• Positive result for COVID-19 • Cohorting allowed* • Isolation Designation: Special Droplet + Contact Precautions

Does not need to be negative pressure

COVID-19 Precautions Signage

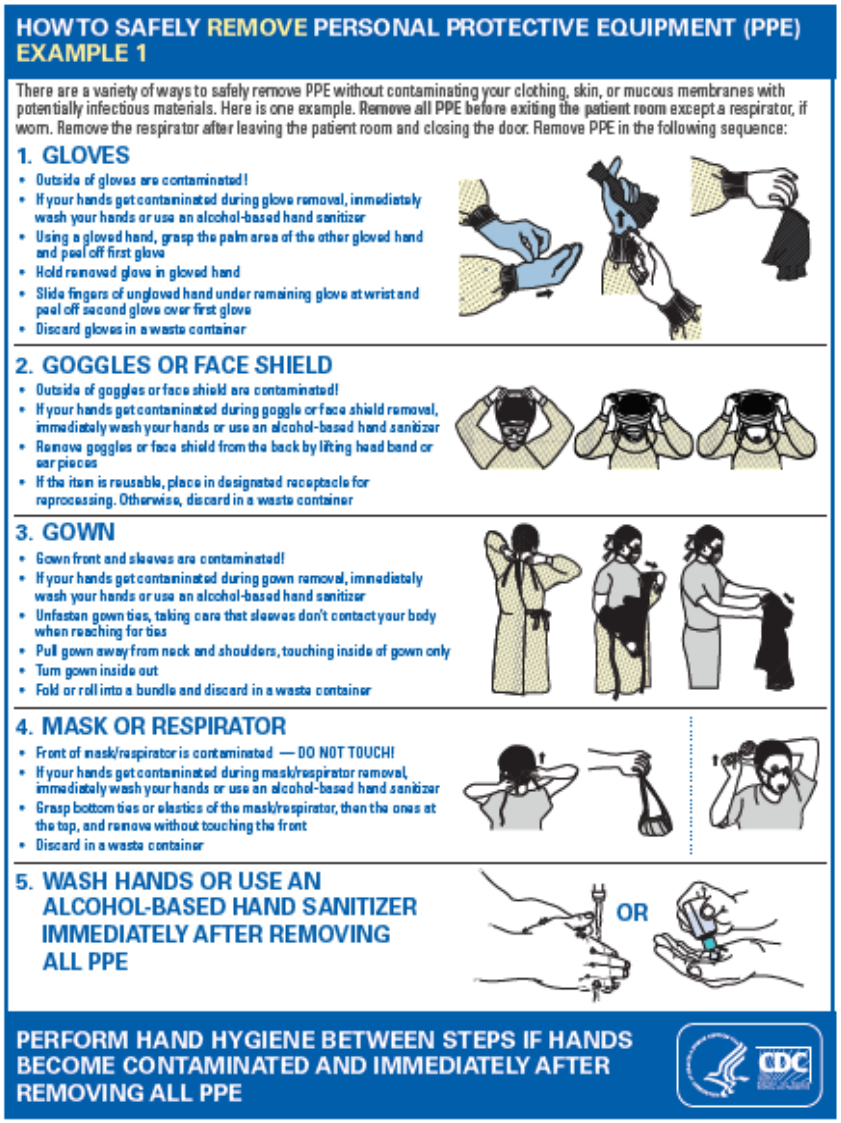
PPE = Personal Protective Equipment

- **Who Requires PPE?**
  - Staff caring for any PUI or confirmed positive COVID-19 patient will follow Special Droplet Precautions in addition to Contact Precautions

- **What constitutes PPE for PUI, and Positive COVID-19?**
  - N95-respirator, Gown, Gloves, Eye protection

Sequence for Putting on (Donning) PPE

Sequence for Taking off (Doffing) PPE



*Note, Example 2 for doffing which is commonly used in the OR can be found at this website: https://www.cdc.gov/hai/pdfs/ppe/ppe-sequence.pdf

PPE Recommendations for Patient Room with Multiple COVID+ Patients

- PPE according to Special Droplet Precautions for the usual care of COVID+ patients: N95 respirator, eye protection, gloves, and gown
- Gloves must be changed between patients
- Hand hygiene must be performed when changing gloves
- The rest of the PPE does NOT have to be changed between patient encounters in the same room

Recommendations for Gown Use in the Setting of Cohorted COVID-19 Positive Patients

- COVID-19 patients and patients under investigation (PUIs) are on Special Droplet and Contact Precautions; gowns should be worn to protect from droplets
- The gowns currently available in our hospitals for care of a COVID-19 patient are adequate to protect the healthcare worker from contamination even during aerosol generating procedures
- The same gown can be worn when caring for COVID-19 patients cohorted in the same room. This allows the healthcare worker to complete their tasks efficiently and avoid the risk of contamination by doffing less frequently
  - If a COVID-19 patient is not cohorted in the same room, gowns and gloves must be discarded before leaving the room
- If the gown becomes visibly soiled or torn, please plan on exiting the room and remove and discard as per usual practices

Eye Protection

During periods of low to minimal transmission of COVID-19 in the community:

- Eye protection are recommended but not required when providing direct patient care
  - Acceptable eye protection include a surgical mask with an attached face shield, a full face shield, or goggles

PPE Recommendations during Aerosol Generating Procedures

- An N-95 respirator along with eye protection is highly recommended for staff who are performing aerosol generating procedures on patients who regardless of COVID-19 infection status
- Eye protection has always been part of standard precautions when performing aerosol generating procedures even before the COVID-19 pandemic. Aerosol generating procedures that are likely to generate splashes of blood, body fluids, secretions especially suctioning and endotracheal intubation/extubation even on patients who test negative for COVID-19 infection

N95 Respirators and Facial Hair

- Close fitting respirators need to seal tightly to the face. Gaps in the face-seal let the dirty air leak inside the N95 respirator.
- Face seal leakage reduces the wearer's protection. Even a day or two's growth of stubble can be enough to give significant leak paths for contaminants.
- Staff must be ready to don the appropriate N-95 respirator that they have been fit tested for at the start of each shift.
- Facial hair must be trimmed consistent with the chart below.
- Staff with religious or other concerns should discuss with their manager, who may consult with Labor Relations.

https://www.cdc.gov/niosh/npptl/pdfs/FacialHairWmask11282017-508.pdf